

MULTIPLE DEPENDENT CLAIM  
CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SEARCHED

INDEXED

FILED

APPLICANT(S)

SEARCHED

INDEXED

FILED

FILING DATE

	CLAIMS											
	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT		AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
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48							98					
49							99					
50							100					
TOTAL IND.												
TOTAL DEP.												
TOTAL CLAIMS												

BEST AVAILABLE COPY